

HIPAA SERVICE CODE AND STATUS	HIPAA CODE SHORT DESCRIPTION	SPC BASE CODE	SPC SUB CATEGORY	SPC SHORT DESCRIPTION	HSRS PROGRAM MODULE
A0080 Approved	Non-emergency transportation, per mile - vehicle provided by volunteer (individual or organization), with no vested interest.	107	40	Specialized Transportation & Escort - miles	LTS CIP1, BIW, CLTS
A0090 Approved	Non-emergency transportation, per mile - vehicle provided by individual (family member, self, neighbor) with vested interest.	107	40	Specialized Transportation & Escort - miles	LTS CIP1, BIW, CLTS
A0100 Approved	Non-emergency transportation; taxi.	107	30	Specialized Transportation & Escort - 1 way trips	LTS CIP1, BIW, CLTS
A0130 Approved	Non-emergency transportation; wheelchair van.	107	30	Specialized Transportation & Escort - 1 way trips	LTS CIP1, BIW, CLTS
A0160 Approved	Non-emergency transportation: per mile - caseworker or social worker. 6) Non-emergency transportation; mileage, per mile.	107	40	Specialized Transportation & Escort - miles	LTS CIP1, BIW, CLTS
E1399 Approved	Durable Medical Equipment, miscellaneous	112	47	Communication Aids	LTS CIP1, BIW, CLTS
H0025 Approved	Respite care services, not in the home, per diem.	103	99	Respite Care-Other	LTS CIP1, BIW, CLTS
H0038 Approved	Self-help / peer services, per 15 minutes.	113	blank	Consumer Education and Training	LTS CIP1, BIW, CLTS
H0041 Approved	Foster care, child, non-therapeutic, per diem.	203	blank	Children's Foster Home	LTS CIP1, BIW, CLTS
H0043 Approved	Supported housing, per diem.	106	03	Housing Start-up	LTS CIP1, BIW
H0044 Approved	Supported housing, per month.	106	03	Housing Start-up	LTS CIP1, BIW
H2023 Approved	Supported employment, per 15 minutes.	615	blank	Supported Employment	LTS CIP1, BIW, CLTS
H2024 Approved	Supported employment, per diem.	615	blank	Supported Employment	LTS CIP1, BIW, CLTS
H2025 Approved	Ongoing support to maintain employment, per 15 minutes.	615	blank	Supported Employment	LTS CIP1, BIW, CLTS
H2026 Approved	Ongoing support to maintain employment, per diem.	615	blank	Supported Employment	LTS CIP1, BIW, CLTS
K0541 - K0547 Approved	Speech generating devices and their accessories.	112	47	Communication Aids	LTS CIP1, BIW, CLTS
S0215 Approved	Non-emergency transportation; mileage, per mile.	107	40	Specialized Transportation & Escort - miles	LTS CIP1, BIW, CLTS
S5100 Approved	Day care services, adult; per 15 minutes.	102	blank	Adult Day Care	LTS CIP1, BIW
S5101 Approved	Day care services, adult; per half day.	102	blank	Adult Day Care	LTS CIP1, BIW
S5102 Approved	Day care services, adult; per diem.	102	00	Adult Day Care	LTS CIP1, BIW
S5121 Approved	Home care training, family; per diem.	104	12	SHC Supervision Services - Days	LTS CIP1, BIW, CLTS
S5160 Approved	Emergency response system; installation and testing.	112	46	Personal Emergency Response Systems	LTS CIP1, BIW, CLTS
S5161 Approved	Emergency response system; service fee, per month (excludes installation and testing).	112	46	Personal Emergency Response Systems	LTS CIP1, BIW, CLTS
S5162 Approved	Emergency response system; purchase only.	112	46	Personal Emergency Response Systems	LTS CIP1, BIW, CLTS
S5165 Approved	Home modifications, per service.	112	56	Home Modifications	LTS CIP1, BIW, CLTS
S9125 Approved	Respite care services, in the home, per diem.	103	22	Residential Respite	LTS CIP1, BIW, CLTS
T1005 Approved	Respite care services, up to 15 minutes.	103	99	Respite Care-Other	LTS CIP1, BIW, CLTS

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T1008 Approved	Day treatment for individual alcohol and / or substance abuse services.	503	blank	Inpatient	LTS CIP1, BIW, CLTS
T1012 Approved	Alcohol and / or substance abuse services, skills development.	108	blank	Prevocational Services	LTS CIP1, BIW
T1013 Approved	Sign language or oral interpretive services, per 15 minutes.	507	03	Counseling and Therapeutic Resources - Hours	LTS CIP1, BIW, CLTS
T1017 Approved	Targeted Case Management, each 15 minutes	604	Optional SPC Sub Category Codes Include 01, 02, 03, 04	Case Management	LTS CIP1, BIW, CLTS
T1019 Approved	Personal care services, per 15 minutes, not for an inpatient or resident of a hospital, nursing facility, ICF/MR or IMD, part of the individualized plan of treatment (code not be used to identify services provided by home health aide or certified nurse assistant).	104	21	SHC Personal Care - Hours	LTS CIP1, BIW, CLTS
T1020 Approved	Personal care services, per diem, not for an inpatient or resident of a hospital, nursing facility, ICF/MR or IMD, part of the individualized plan of treatment (code not be used to identify services provided by home health aide or certified nurse assistant).	104	11	SHC Personal Care - Days	LTS CIP1, BIW, CLTS
T1027 Approved	Family training and counseling for child development, per 15 minutes.	110	blank	Daily Living Skills Training	LTS CIP1, BIW, CLTS
T1999 Approved	Miscellaneous therapeutic items and supplies, retail purchases, not otherwise classified; identify product in 'remarks'.	507	04	Counseling and Therapeutic Resources - Items / Services	LTS CIP1, BIW
T2001 Approved	Non-emergency transportation; patient attendant / escort.	107	30	Specialized Transportation & Escort - 1 way trips	LTS CIP1, BIW, CLTS
T2002 Approved	Non-emergency transportation; per diem.	107	30	Specialized Transportation & Escort - 1 way trips	LTS CIP1, BIW, CLTS
T2003 Approved	Non-emergency transportation; encounter / trip.	107	30	Specialized Transportation & Escort - 1 way trips	LTS CIP1, BIW, CLTS
T2004 Approved	Non-emergency transportation; commercial carrier, multi-pass.	107	30	Specialized Transportation & Escort - 1 way trips	LTS CIP1, BIW, CLTS
V5268 - V5274 Approved	Assistive listening devices (other than hearing aid).	112	47	Communication Aids	LTS CIP1, BIW, CLTS